F	7
•	١

Total Pages

PTO/SB/05 (12/97)

Please type a plus sign (+) inside this box

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attorney Docket No.

UTILITY PATENT APPLICATION **TRANSMITTAL**

First Named Inventor or Application Identifier

1-5703

Gerald L. Myers

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. EM037042162US

	PLICATION ELEMENTS for 600 concerning utility patent application	contents.	ADDRESS TO:	Box Patent App	
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing) 2. X Specification [Total Pages 14] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. X Drawing(s) (35 USC 113) [Total Sheets 4] 4. Oath or Declaration [Total Pages 2] a. X Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) 6. Microfiche Computer Program (Appendix (if applicable, all necessary)) 7. Nucleotide and/or Amino Acid Sequence Submit (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to compute Compute Program (Appendix (if applicable, all necessary)) a. Computer Readable Copy b. Accompanying Application of the Drawings (if filed) 8. X Assignment Papers (cover sheet & down (when there is an assignee) [X] Polymore is an assignee [X] Polymore					ram (Appendix) equence Submission de Copy cal to computer copy) g identity of above copies CATION PARTS er sheet & document(s)) at
	ompanying application and is hereby in the received in the rec	ncorporated by			
	TINUING APPLICATION, check appr	opriate box and			
Con		nuation-in-part (C		on No:	
	18. CO	RRESPOND	ENCE ADDRESS		
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)					
NAME	Richard S. MacMillan				
NAME	MacMillan, Sobanski &	Todd			
4005500	One Maritime Plaza, F	ourth Flo	oor		
ADDRESS 720 Water Street					
aty	Toledo	STATE	Ohio	ZIP CODE	43604
COUNTRY	U.S.A.	TELEPHONE	419-255-5900	FAX	419-255-9639

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Box Patent Application, Washington, DC 20231.

PTO/SB/17 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

		Сотр	Complete if Known	
FEE TRANSMITTAL		Application Number		
		Filing Date	,	
	First Named Inventor	Gerald L. Myers		
Note: Effective October 1, 1997.		Group Art Unit		
Patent fees are subject to annual revision.		Examiner Name		
TOTAL AMOUNT OF PAYMENT	(\$) 830.00	Attorney Docket Number	1-5703	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any over payments to:	Large Eptity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	Fee Paid			
Account Number	105 130 205 65 Surcharge - late filing fee or oath				
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.				
Charge Any Additional Charge the Issue Fee Set in	139 130 139 130 Non-English specification	į.			
Fee Required Under 37 CFR 1.18 at the Mailing of the Notice of Allowance	147 2,520 147 2,520 For filing a request for reexamination				
	112 920* 112 920* Requesting publication of SIR prior to				
2. X Payment Enclosed: X Check Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
	115 110 215 55 Extension for reply within first month				
FEE CALCULATION	116 400 216 200 Extension for reply within second month				
1. FILING FEE	117 950 217 475 Extension for reply within third month				
Large Entity Small Entity	118 1,510 218 755 Extension for reply within fourth month	<u> </u>			
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	128 2,060 228 1,030 Extension for reply within fifth month				
101 790 201 395 Utility filing fee 790.00	119 310 219 155 Notice of Appeal				
106 330 206 165 Design filing fee	120 310 220 155 Filing a brief in support of an appeal				
107 540 207 270 Plant filing fee	121 270 221 135 Request for oral hearing	<u> </u>			
108 790 208 395 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding				
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	<u> </u>			
SUBTOTAL (1) (\$) 790.00	141 1,320 241 660 Petition to revive - unintentional				
	142 1,320 242 660 Utility issue fee (or reissue)				
2. CLAIMS Extra Fee from Fee Paid	143 450 243 225 Design issue fee				
Total Claims $13 - 20 = 0 \times = 0.00$	144 670 244 335 Plant issue fee				
Independent 1 -3 = 0 X = 0.00	122 130 122 130 Petitions to the Commissioner				
Multiple Dependent Claims 0 X = 0.00	123 50 123 50 Petitions related to provisional applications				
Large Entity Small Entity	126 240 126 240 Submission of Information Disclosure Stmt				
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	40.00			
103 22 203 11 Claims in excess of 20	146 790 246 395 Filing a submission after final rejection				
102 82 202 41 Independent claims in excess of 3	(37 ČFR 1.129(a)) 149 790 249 395 For each additional invention to be				
104 270 204 135 Multiple dependent claim	examined (37 CFR 1.129(b))				
109 82 209 41 Reissue independent claims over original patent	Other fee (specify)				
110 22 210 11 Reissue claims in excess of 20 and over original patent	Other fee (specify)				
SUBTOTAL (2) (\$) 0.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				
SUBMITTED BY Complete (if applicable)					
Typed or Prichard S. MacMillan	Reg. Number 30,	085			
Printed Name Richard S. MacMillan	rieg. radiibei 30,	000			

Deposit Account User ID Date 12/23/97 Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.